

II. ADDRESSES AND INFORMATION

A. PLAINTIFF

FALLINGS ADRIAN E.

Name (Last, First, MI)

Inmate Number

FR-5045

Place of Confinement

SCI-BENNER TOWNSHIP

Address

301 INSTITUTIONS DRIVE BELLEFONTE P.A. 16823

City, County, State, Zip Code

Indicate whether you are a prisoner or other confined person as follows:

- ☐ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☒ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner

B. DEFENDANT(S)

Provide the information below for each defendant. Attach additional pages if needed.

Make sure that the defendant(s) listed below are identical to those contained in the caption. If incorrect information is provided, it could result in the delay or prevention of service of the complaint.

Defendant 1:

Sgt. Martell

Name (Last, First)

Sgt. Martell

Current Job Title

SERGEANT

Current Work Address

SCI-BENNER TOWNSHIP 301 INSTITUTIONS DRIVE

City, County, State, Zip Code

BELLEFONTE, P.A 16823

Defendant 2:

Name (Last, First)

Current Job Title

Current Work Address

City, County, State, Zip Code

Defendant 3:

Name (Last, First)

Current Job Title

Current Work Address

City, County, State, Zip Code

Defendant 4:

Name (Last, First)

Current Job Title

Current Work Address

City, County, State, Zip Code

Defendant 5:

Name (Last, First)

Current Job Title

Current Work Address

City, County, State, Zip Code

III. STATEMENT OF FACTS

State only the facts of your claim below. Include all the facts you consider important. Attach additional pages if needed.

A. Describe where and when the events giving rise to your claim(s) arose.

SCI-BENNER TOWNSHIP ON FA BLOCK

B. On what date did the events giving rise to your claim(s) occur?

6-11-20

C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?)

ON THE ABOVE DATE AND TIME 6-11-20 AT 2:36 p.m.
I ASK SERGEANT MARTELL WHEN WOULD HE SIGN CABLE SLIPS.
HE SAID FUCK THEM SLIPS AND AS FAR AS I'M CONCERNED
WITH YOU, JUST KNOW THAT YOUR CELLY PUT A GRIEVANCE IN
ON ME NOW YOU CAUGHT UP IN THE MIDDLE OF IT AND YOU GAVE
TO FEEL THE WRATH FOR THIS SHIT AND WHEN I COME INTO
YOUR CELL I DON'T WANT TO HEAR THAT YOU CAN'T BREATHE BULLSHIT.
(WHICH WAS IN REFERENCE TO GEORGE FLOYD INCIDENT)

DOC POLICY AS FAR AS ABUSE ALLEGATIONS (DC-ADM001)
CHAPTER 4 ARTICLE A VERSE 1:C

A VERBAL OR WRITTEN THREAT TO INFLECT PHYSICAL
INJURY DIRECTED TOWARD YOU.

IV. LEGAL CLAIM(S)

You are not required to make legal argument or cite any cases or statutes. However, state what constitutional rights, statutes, or laws you believe were violated by the above actions. If you intend to assert multiple claims, number and set forth each claim in separate paragraphs. Attach additional pages if needed.

Violation OF the Equal Protection Clause OF The
FOURTEEN AMENDMENT.

He ALSO ACTED "MALICIOUSLY AND SADISTICALLY FOR THE
VERY PURPOSE OF CAUSING HARM" VIOLATING ALSO THE
FOURTEENTH AMENDMENT TO THE UNITED STATES CONSTITUTION

A CONSTITUTIONAL PROTECTION FOR PRISONERS SUBJECT
TO INHUMANE CONDITION OF CONFINEMENT.

PROCEDURAL DUE PROCESE

V. INJURY

Describe with specificity what injury, harm, or damages you suffered because of the events described above.

VI. RELIEF

State exactly what you want the court to do for you. For example, you may be seeking money damages, you may want the court to order a defendant to do something or stop doing something, or you may be seeking both types of relief. If you are seeking monetary relief, state your request generally. Do not request a specific amount of money.

I'm ASKING FOR \$60,000.00.

VII. SIGNATURE

By signing this complaint, you represent to the court that the facts alleged are true to the best of your knowledge and are supported by evidence, that those facts show a violation of law, and that you are not filing this complaint to harass another person or for any other improper purpose.

Local Rule of Court 83.18 requires *pro se* plaintiffs to keep the court informed of their current address. If your address changes while your lawsuit is being litigated, you must immediately inform the court of the change in writing. By signing and submitting the complaint form, you agree to provide the Clerk's Office with any changes to your address where case-related papers may be served, and you acknowledge that your failure to keep a current address on file with the Clerk's Office may result in dismissal of your case.

Adrian Fallings
Signature of Plaintiff

9-20-20
Date

ADRIAN FALLINGS FR-5045
SCI-BENNER TOWNSHIP
301 INSTITUTIONS DRIVE
BELLEFONTE, P.A. 16823

INMATE MAIL
PA DEPT OF
CORRECTIONS



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SEP 24 2020

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TO. OFFICE OF THE CLERK
UNITED STATES DISTRICT COURT
MIDDLE DISTRICT OF PENNSYLVANIA
WILLIAM J. NEALON FEDERAL BLDG. & U.S. COURT HOUSE
235 NORTH WASHINGTON AVENUE
P.O. BOX 1148
SCRANTON, P.A. 18501-1148

1650131148 BOSS

